



City of Detroit

**OFFICE OF
THE AUDITOR GENERAL**

**Human Services
Department
Control Self-Assessment
Summary Report**

February 2002



CITY OF DETROIT
DEPARTMENT OF HUMAN SERVICES

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Memorandum

To: Mayor Kwame M. Kilpatrick
Honorable City Council

From: Dwayne A. Haywood, Interim Director *DAH*

Date: May 7, 2002

Re: Control Self-Assessment

The Department of Human Services (DHS) participated in a full Controlled Self-Assessment (CSA) training the week of January 28 – February 1, 2002 facilitated by the Office of the Auditor General. This new process was chosen over the standard method to assist in facilitating our own internal assessment that began last year. Our assessment was created out of the need to work toward development of a Strategic Plan that would be consistent with the vision of the Kilpatrick Administration. DHS reviewed prior policies and procedures, service delivery and overall staffing needs to determine short and long term goals. The CSA final report and the information obtained during the weeklong training will be utilized to continue the internal assessment.

Attached for your review is our report on the Control Self-Assessment of the Human Services Department.

This report contains an overview of control self-assessment process and the summary of the control self-assessments with management and employees from the Drug Treatment, Homeless, Child Development, Center Operations, Weatherization, Accounting and Planning Divisions of the Human Services Department. It includes the objective, impact of non-achievement, indicators of performance, residual risk status index, threats to achievement, unacceptable concerns, action plans and impediments to achievements of the objective of each division.

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City of Detroit Department of Human Services Control Self-Assessment Summary Report

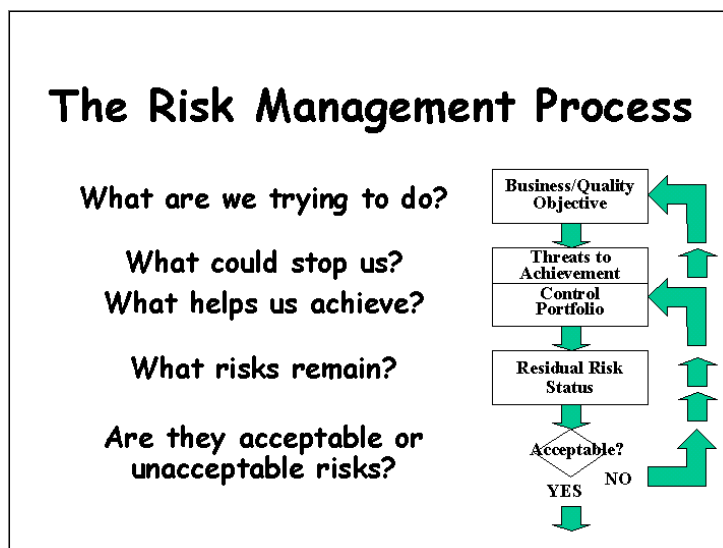
Introduction

This report contains the output from Control Self-Assessment (CSA) sessions with management and employees from the Drug Treatment, Homeless, Child Development, Center Operations, Weatherization, Accounting and Planning Divisions of the Human Services Department. The sessions were facilitated by the Office of the Auditor General. The output did not include an individual risk assessment of the Accounting and Planning Division. However, Accounting and Planning participated in CSA sessions for each of the five divisions where output is reported. Although independent verification of the representations made by the participants during the workshop has not taken place, a certain amount of assurance on the reliability of the information produced has been obtained from the candid disclosure and involvement of the participants, the extent of the review by participants subsequent to the workshop, and the ability of the group to describe specific indicator and impact residual risk status information.

Control Self-Assessment Process Overview

CSA is a mechanism used to shift the accountability for control and risk assessment and reporting from audit to management and work teams, and provide them a basis for demonstrating their stewardship. Under CSA, the burden of analyzing and reporting on control and risk, including the formation of opinions on control effectiveness and acceptability of residual risk status, is the responsibility of management and employees.

The diagram below provides an overview of the risk assessment process used in the workshop. For completeness, a risk model and a control model were used by the facilitator throughout the process.



The benefits of conducting a CSA includes:

- Empowering employees, increasing accountability, identifying inter-department dependencies and providing employees with a broader department-wide perspective.
- Providing employees with a better understanding of business risk and internal controls and consensus at all levels on relevant business/quality objectives and levels of acceptable risk.
- Identifying ideas and suggestions to correct problematic and/or high risk areas that have been a source of concern.
- Helping management to visibly fulfill their responsibilities with respect to control and quality management.
- Providing the Auditor General and management the tools to assess the control environment within a department between audits.
- Providing a powerful tool to supplement audit work, and the potential reduction of audit time.

In the workshops, an objective from each of the following Divisions was assessed:

1. **Drug Treatment**
2. **Homeless**
3. **Child Development**
4. **Center Operations**
5. **Weatherization**

Responsibility to perform tasks to complete the assessments was assigned to the participants subsequent to the externally facilitated workshop.

For each of the objectives, this report classifies the information obtained during the risk assessment in the following categories:

(a.) Objective, Impact of Non-Achievement, Indicators of Performance and the Residual Risk Status Index (RRSI)

The business/quality objective is a statement of desired end result, and is the focus for the risk assessment. The impact of non-achievement is the result of not achieving the objective. Indicators of performance are measurement criteria for management to utilize to determine whether they are achieving specific objectives. Residual risk status is information that helps management assess the acceptability of residual risk.

(b.) Threats to Achievement

Threats to achievement are possible problems or situations that could result in the non-achievement of the objective.

Workshop participants classified the threats to achievement according to their perceived likelihood and consequence, using the following ratings:

Likelihood:	Rare	Consequence:	Negligible
	Unlikely		Low
	Moderate		Medium
	Likely		Very High
	Almost Certain		Extreme

(c.) Unacceptable Concerns Related to the Objective

Concerns include any known or suspected problems or issues related to the business/quality objective being assessed. These are identified by the workshop participants, and can be categorized as either acceptable or unacceptable.

(d.) Impediments to Achievement of the Objective

Impediments are defined as situations or problems that stand in the way of the group responsible for adjusting the control portfolio.

1. Drug Treatment Division

(a.) Objective, Impact of Non-Achievement, Indicators of Performance and the Residual Risk Status Index (RRSI)

The objective of the Drug Treatment Division used in this assessment is:

To obtain a high level of accreditation on the new Department of Health and Human Services - Substance Abuse and Mental Health Services Administration for our three clinics by December 2002.

It was determined that the impact of not achieving this objective will result in loss of funding and closure of the substance abuse operation in the City of Detroit (City).

Indicators of current performance include the fact that the Drug Treatment Division held JCAHO (Joint Commission Accreditation of Healthcare Organizations) accreditation for the past seven years, as mandated by the State of Michigan.

The RRSI was determined to be **moderate**, considering that **inaction on unacceptable items could result in or will allow continuation of mid-level negative impacts. Moderate effort is required to adjust status to an acceptable level.**

(b.) Threats to Achievement

The risk assessment identified threats to achievement for the Drug Treatment Division's objective. Listed below are some of the major threats to achievement:

Threats to Achievement
<ul style="list-style-type: none">• Improper or non-working computers.
<ul style="list-style-type: none">• Staffing issues, excessive time taken to fill staff vacancies due to City procedures - delays in Human Resources. Competition of the private sector for nurses. Competitors do not have to comply as rigorously with staffing ratios. Staffing shortages lower the employee morale and increase tension.
<ul style="list-style-type: none">• Uninformed staff - lack of understanding about the reason for the accreditation, the accreditation process and knowledge of program policies and procedures.
<ul style="list-style-type: none">• Breakdown in the communication system (post office) between clinics and the administration.
<ul style="list-style-type: none">• Cost of accreditation for 2002 has to be paid because grandfathering is not granted but cannot be identified in the budget.
<ul style="list-style-type: none">• Lack of adherence to federal confidentiality standards.
<ul style="list-style-type: none">• Lack of documentation on medical procedures carried out on each patient - including TB, HIV, leg ulcers.
<ul style="list-style-type: none">• Less money in pocket paid to City employees compared to private sector.
<ul style="list-style-type: none">• Staff shortages make it impossible to meet mandated State of Michigan ratios - physicians (required ratio: 300/1), nurses (300/1), counselors (40/1).

Threats to Achievement	
•	Problems with the building structure, including deterioration of structure, improper lighting, insufficient space, unclean premises.
•	Reluctance of physicians to do business with the City - they can be working for 6 months before payment due to delays in processing physicians' contracts.
•	Safety issues not properly addressed - handling of medication, safety of staff and patients.
•	Staff theft of narcotics could threaten the accreditation process.

(c.) Unacceptable Concerns Related to the Objective

The following is a listing of the unacceptable concerns for the Drug Treatment Division, and an outline of the action items to which the participants have committed to address them.

Unacceptable Concern	Action Plan Description	Priority, Due Date and Assignee
Accreditation agency not selected as yet.	Select accreditation agency and complete application Accreditation agency selection - review packages and discuss with leadership team. Completion of application package requesting an accreditation survey.	P1 – Urgent Due: 2/21/02 (COMPLETED) Assigned to: Octavius Sapp
Currently, there is a large list of outstanding computer problems - including staff who are unable to log on to the systems - which have yet to be addressed by ITS.	Establish timetable for outstanding computer problems Meet with management of ITS to establish timetable for completion re: Outstanding computer problems; Obtain updated list of computer problems from clinics and meet with management of ITS to establish timetable for completion.	P2 – Important Due: 2/21/02 (COMPLETED) Assigned to: Octavius Sapp
Lack of proper policy and procedures manual - current manual is old and out of date.	Develop and publish procedures manual Procedures manual: review current policy and procedure manual, examine Accreditation manual, make assignments on writing parts of the manual, coordinate, collate, publish hard copy and on disc. Start date is after Feb 21, 2002.	P1 – Urgent Due: 8/31/02 Assigned to: Octavius Sapp

Unacceptable Concern	Action Plan Description	Priority, Due Date and Assignee
Staff not yet fully informed about the significance of this objective.	Review OPIOID (drug) treatment protocols with clinic staff Supervisors to review the state regulations OPIOID treatment protocols with clinic staff at regular staff meetings. Also review the protocols of the accreditation manual.	P1 – Urgent Due: 10/31/02 Assigned to: Clinic Supervisors

(d.) Impediments to Achievement of the Objective

The following is a listing of the impediments to the achievement of the objective for the Drug Treatment Division, the resolution of which is beyond the authority of the work team to address directly.

Impediments
<ul style="list-style-type: none"> • Excessive time taken to fill staff vacancies due to City procedures - delays in Human Resources, resulting in understaffed clinics. • Competition of the private sector for nurses. Competitors do not have to comply as rigorously with staffing ratios. • Less money in pocket paid to City employees compared to private sector. • No City-sponsored financial or non-financial reward for achieving accreditation. • Staff shortages make it impossible to meet mandated state ratios - physicians (required ratio: 300/1), nurses (300/1), counselors (40/1). • Staffing shortages lower the employee morale and increase tension - dependency on management team to keep morale as high as possible.

2. Homeless Division

(a.) Objective, Impact of Non-Achievement, Indicators of Performance and the Residual Risk Status Index (RRSI)

The objective of the Homeless Division used in this assessment is:

To provide technical assistance to emergency shelter providers so that all emergency shelters are licensed by June 30, 2002.

The impact of not achieving this objective will be that sub-contractors will not be paid until the contract has been approved.

Indicators of current performance are that, in most cases, contracts have been in position before the end date of the contract. Recently, there have been a small number of contracts (approximately 10%) in place before the effective date.

The RRSI was determined to be **moderate**, considering that **inaction on unacceptable items could result in or will allow continuation of mid-level negative impacts. Moderate effort is required to adjust status to an acceptable level.**

(b.) Threats to Achievement

The risk assessment identified threats to achievement for the Homeless Division's objective, as listed below:

Threats to Achievement
<ul style="list-style-type: none">• Delay in delivering the technical assistance to the emergency shelter providers through workshops or other vehicles.
<ul style="list-style-type: none">• Inconsistency in inspection standards of the departments involved.
<ul style="list-style-type: none">• Process of licensing is not clear to providers of emergency shelters.
<ul style="list-style-type: none">• Lack of money to fund Building & Safety Department findings re: structural modifications required for licensing.
<ul style="list-style-type: none">• No clear understanding in the other departments as to what should be done for licensing: Buildings & Safety, Health, Fire, Human Services, Police, Consumer Affairs, Water, Finance.
<ul style="list-style-type: none">• This objective is not a priority in the other departments of the City involved in the licensing process.

(c.) Unacceptable Concerns Related to the Objective

The following is a listing of the unacceptable concerns for the Homeless Division, and an outline of the action items to which the participants have committed to address them.

Unacceptable Concern	Action Plan Description	Priority, Due Date and Assignee
<ul style="list-style-type: none"> - Problems with clearances – income tax. Property tax and human rights - slow down the process - clearance can take up to 30 days to obtain. - Problems with insurance documentation from the sub contractors slow down the process. 	Communicate to the Director for resolution Communicate the history of this situation to the Director for resolution of this situation.	P1 - Urgent Due: 3/1/02 (COMPLETED) Assigned to: Leonard Brogdon
<ul style="list-style-type: none"> - There can be lapse in clearance or insurance coverage if there is a delay in the signing of the contract. 	Monitor expiration dates closely Monitor expiration dates more closely.	P2 - Important Due: 3/1/02 (COMPLETED) Assigned to: Leonard Brogdon
<ul style="list-style-type: none"> - No analysis has been performed about where the delays are in the contract approval process - Law can present a problem And Budget can present a problem late September through October. 	Analysis of approved contracts Prepare an analysis of the time taken for the contract approvals in the other Departments.	P2 – Important Due: 3/1/02 (COMPLETED) Assigned to: Delores Bills
<ul style="list-style-type: none"> - Staff not fully trained on Microsoft Word. 	Training for staff on Word ITS is conducting Word training sessions for all staff.	P2 - Important Due: 6/1/02 Assigned to: ITS Division

Unacceptable Concern	Action Plan Description	Priority, Due Date and Assignee
- Focus at present has been on getting the contracts approved earlier in the term; getting the contracts approved prior to the effective date has been less of a consideration.	Examine impact on contractors of the change Examine impact on contractors of the change; evaluate of survey, design changes after analysis of results.	P2 - Important Due: 4/1/02 Assigned to: Cora Nelson

(d.) Impediments to Achievement of the Objective

The following is a listing of the impediments to the achievement of the objective for the Homeless Division, the resolution of which is beyond the authority of the work team to address directly.

Impediments
<ul style="list-style-type: none"> Contract completion dates are not easily visible on DRMS.
<ul style="list-style-type: none"> In some cases, Law Department will request the delivery of a contract from their department to the Finance Department – Purchasing Division.
<ul style="list-style-type: none"> Money cannot be used before July 1, due to the budget process.
<ul style="list-style-type: none"> Number of departments that the contract has to go through holds up the approval process – Budget, Finance, Law, Purchasing.
<ul style="list-style-type: none"> Process with other departments can only start when contract has been signed by sub-contractor and Department Director.
<ul style="list-style-type: none"> There is only one person who can approve the standard purchase order and in her absence, SPOs are not approved.

3. Child Development Division

(a.) Objective, Impact of Non-Achievement, Indicators of Performance and the Residual Risk Status Index (RRSI)

The objective of the Child Development Division used in this assessment is:

To strengthen and empower low-income children and families to break the cycle of poverty.

It was determined that although there is no guarantee that families will break the cycle of poverty, the benefits of the program outweigh its deficiencies. The program is constantly evolving to increase our ability to more fully meet the objectives.

Indicators of current performance are parents of Head Start children are gainfully employed as a result of their participation in the Head Start program.

The RRSI was determined to be **moderate**, considering that **inaction on unacceptable items could result in or will allow continuation of mid-level negative impacts. Moderate effort is required to adjust status to an acceptable level.**

(b.) Threats to Achievement

The risk assessment identified threats to achievement for the Child Development Division's objective. Listed below are some of the major threats to achievement:

Threats to Achievement
• Competition from the day care centers, Detroit Public Schools and unlicensed child minders who can provide 24/7 child minding services reduces number of available participants.
• Insufficient program options. i.e. full day, odd hour, weekend programs.
• Lack of a centralized computerized child client tracking system to allow for effective monitoring.
• Lack of a centralized inventory system could lead to loss of funding (all assets over \$150 have to be tracked in delegate agencies and grantee – note: federal standard is higher \$5,000).
• Lack of collaborative efforts between City departments impedes ability to deliver program services in a timely manner.
• Lack of community awareness and marketing of the programs available for young children.
• Lack of enrollment in the programs may lead to reduced funding or programming.
• Lack of facilities that meet state and local regulations for child care centers.
• Noncompliance with the federal performance standards at the delegate and grantee levels.
• Suppliers of Head Start services not paid in a timely manner leads to supplier reluctance to do business with the City.
• Changes in demographics in areas serviced by the programs lead to low enrollment, unavailable, licensable facilities and under-served areas.

Threats to Achievement	
•	Circumvention of the authority of the grantee by the delegate agencies; inappropriate intervention of Human Services Department personnel in decision-making re: delegate agencies.
•	Lack of cooperation and working relationship with the public schools in the transitioning.
•	Lack of planning for expenditure of funds can result in the requirement to return funds to the federal government.
•	Lack of timely front-end involvement of all stakeholders in the planning process. Poor communication within the Human Services Department and lack of involvement of all key stakeholders in decisions.
•	Poor inter-department communications and the Mayor's Office within the city: Purchasing, Law, Finance, Budget, Fire Department.
•	Poor program delivery by a delegate agency.
•	Procedures are undocumented, inconsistent, vague and not known to other staff members within the department.
•	Current political/economic climate may affect the funding available.
•	Wayne County program pays Head Start staff at a higher level than the City.

(c.) Unacceptable Concerns Related to the Objective

The following is a listing of the unacceptable concerns for the Child Development Division, and an outline of the action items to which the participants have committed to address.

Unacceptable Concern	Action Plan Description	Priority, Due Date and Assignee
- Circumvention of the authority of the grantee by the delegate agencies; inappropriate intervention of Human Services Department personnel in decision-making re: delegate agencies.	Development & implementation of operational procedures. Development, implementation, and enforcement of operational procedures including attendance, dress code, code of conduct and personnel.	P2 – Important Due: 5/5/02 Assigned to: Executive Director
- Lack of a centralized inventory system could lead to loss of funding (all assets over \$150 have to be tracked in delegate agencies and grantee - note: federal standard is higher \$5,000).	Develop and implement program software Develop and implement program software to capture inventory assets in database.	P2 – Important Due: 5/5/02 Assigned to: Bill Warren

Unacceptable Concern	Action Plan Description	Priority, Due Date and Assignee
- Lack of planning for expenditure of funds can result in the requirement to return of funds to federal government.	Develop re-programming process and timelines for various programs.	P2 – Important Due: 8/5/02 Assigned to: All key stakeholders
- Inconsistency in the BSED licensing process necessitates rework of renovations which adds cost, and results in program delays.	Develop multi-grantee facility workgroup.	P2 – Important Due: 2/5/03 Assigned to: Jim Martin (Planning Division)
- Poor program delivery by a delegate agency.	Enforcement of contract by Compliance Committee.	P2 – Important Due: 2/5/03 Assigned to: Division Director and Executive Director
- Lack of community awareness, and marketing of the programs available for young children.	Full scale marketing plan for entire department. Full scale marketing plan for entire department (multi-media - Department driven).	P2 – Important Due: 2/5/03 Assigned to: Administration with Division's Head

(d.) Impediments to Achievement of the Objective

The following is a listing of the impediments to the achievement of the objective for the Child Development Division, the resolution of which is beyond the authority of the work team to address directly.

Impediments
<ul style="list-style-type: none"> • Current political/economic climate may affect the funding available. • Lack of process oversight due to staff vacancies. • Changes in demographics in areas serviced by the program leads to low enrollment, unavailable, licensable facilities and underserved areas. • Competition from the day care centers, Detroit Public Schools and unlicensed child minders, who can provide 24/7 child minding services, reduces number of available participants. • Lack of available support and administrative personnel to staff the programs.

Impediments
<ul style="list-style-type: none"> • Lack of collaborative efforts between City departments impedes ability to deliver program services in a timely manner.
<ul style="list-style-type: none"> • Lack of facilities that meet state and local regulations for child care centers.
<ul style="list-style-type: none"> • Poor inter-department communications and the Mayor's Office within the city: Purchasing, Law, Finance, Budget, and Fire Department.
<ul style="list-style-type: none"> • Suppliers of Head Start services not paid in a timely manner leads to supplier reluctance to do business with the City.
<ul style="list-style-type: none"> • Welfare Reform Acts at federal and state levels require low-income parents to work or receive training/schooling to continue receiving assistance.
<ul style="list-style-type: none"> • Annual evaluations are performed only as part of the program requirements and are not used for any purpose; union negotiations determine wage levels, and not the evaluations.
<ul style="list-style-type: none"> • Delegate and department promotion and hiring practices can hinder the delivery of services by trained personnel.
<ul style="list-style-type: none"> • Programs have to be suspended while waiting for certificate of occupancy from BSED.
<ul style="list-style-type: none"> • Inadequate funding from federal and state governments.
<ul style="list-style-type: none"> • Inadequate supply of qualified staff available for program delivery and expansion.
<ul style="list-style-type: none"> • Low income/high risk children can be excluded from eligibility because current federal income guidelines are too low.
<ul style="list-style-type: none"> • Lack of parental attention to the children due to interference of parental vices impedes the children's assimilation into the Head Start program.
<ul style="list-style-type: none"> • Special education laws in Michigan are inconsistent with federal Head Start special education requirements - federal is age 3, Michigan is age 5 - special needs children not identified before reaching the school system at age 5.
<ul style="list-style-type: none"> • Wayne County program pays Head Start staff at a higher level than the City.

4. Center Operations Division

(a.) Objective, Impact of Non-Achievement, Indicators of Performance and the Residual Risk Status Index (RRSI)

The objective of Center Operations used in this assessment is:

To facilitate appropriate and comprehensive customer intakes and need assessments for the subsequent provision of a myriad of essential services.

The impact of not achieving this objective will be a significant reduction in funding for Center Operations if ineligible clients are cited by the grantor.

An indicator of current performance is that no significant findings have been cited by the grantor for the past 12 months relating to the eligibility of clients serviced by Center Operations.

The RRSI was determined to be **moderate**, considering that **inaction on unacceptable items could result in or will allow continuation of mid-level negative impacts. Moderate effort is required to adjust status to an acceptable level.**

(b.) Threats to Achievement

The risk assessment identified 28 threats to achievement for Center Operation's objective. Listed below are some of the major threats to achievement:

Threats to Achievement
<ul style="list-style-type: none">• Delay in the start of programs – Center Operations could be delayed in commencing services due to the contract approval process.
<ul style="list-style-type: none">• Current application does not capture all the necessary information required by the funding source.
<ul style="list-style-type: none">• Increase of need for services and reduced resources lead to increased customer hostility.
<ul style="list-style-type: none">• Insufficient staff to handle customer requests. Low employee morale leads to poor customer service. Loss of experienced employees and inability to replace an employee immediately due to transfer promotions, medical leave, retirements, family leaves and extended vacation.
<ul style="list-style-type: none">• Updated software to facilitate the intake process is unavailable. Inability to enter the information electronically due to equipment or software failure and lack of technical support from ITS, Accounting, Human Resources and Planning.
<ul style="list-style-type: none">• Lack of availability of suppliers to deliver the contract needs.
<ul style="list-style-type: none">• Misinformation and miscommunication given by other agencies and other City departments.
<ul style="list-style-type: none">• Deliberate non-disclosure of all household income by customer.
<ul style="list-style-type: none">• Inability to obtain all accurate household information. Insufficient customer documentation: failure for the customer to bring in the necessary documentation, due in part to reluctance to provide information.

Threats to Achievement	
• Inadequate supervision of front line staff leads to repetition of errors and poor quality applications. Lack of staff ability to carry out functions with respect to the customers.	
• Lack of income sources to supplement what will be provided by Center Operations.	
• Staff failure to provide complete list of required documents to customers.	
• Loss of potential customers because of transportation difficulties getting to the necessary agencies to gather supporting documentation required by Center Operations.	
• Funding impacted by the promotion of faith-based organizations as direct recipients of funding.	
• Language barrier to customer applications.	
• Programs lack the substance to sustain customers for a long period; lack of resources to do what needs to be done. Each service can only be provided once per year (with the exception of weatherization).	

(c.) Unacceptable Concerns Related to the Objective

The following is a listing of the unacceptable concerns for Center Operations, and an outline of the action items to which the participants have committed to address them.

Unacceptable Concern	Action Plan Description	Priority, Due Date and Assignee
<ul style="list-style-type: none"> - Updated software to facilitate the intake process is unavailable. -Current application does not capture all the necessary information required by the future ROMA needs. - Inability to enter the information electronically due to equipment or software failure and lack of technical support from ITS, Accounting, Human Resources and Planning. 	Upgrade and replacement of computer system, data base, software and application.	P2 – Important Due: 6/30/02 Assigned to: ITS Support

Unacceptable Concern	Action Plan Description	Priority, Due Date and Assignee
-Interpretation of the guidelines may vary between Centers.	Management will issue the new guidelines Management will attend staff meeting of centers to reiterate new policy and procedures as changes and new program occur. Also prepare a written interpretation of the guidelines. Center meetings will be scheduled bi-weekly.	P2 – Important Due: 3/30/02 Assigned to: Robert Walls
- Lack of time and resources to interact with Planning and Accounting to predict customer service requests; staff are working more in a reactive rather than a proactive mode.	Coordinate with Planning and Accounting Divisions. Center ops will meet and coordinate with Planning and Accounting to realistically plan for services to be delivered to customers.	P2 – Important Due: 7/30/02 Assigned to: Robert Walls
- Interpretation of the guidelines may vary between Centers - Staff response to program changes can be slow and they can be resistant to change.	Develop and implement formalized attendance control policy and code of conduct.	P2 – Important Due: 4/30/02 Assigned to: Human Resources
- Lack of staff ability to carry out functions with respect to the customers	Provide appropriate training to employees. Provide appropriate training to employees to better respond to customer needs such as training offered by OEDS as classes become available.	P2 – Important Due: 12/31/02 Assigned to: Robert Walls

(d.) Impediments to Achievement of the Objective

The following is a listing of the impediments that could prevent the achievement of the objective for Center Operations, the resolution of which is beyond the authority of the work team to address directly.

Impediments
<ul style="list-style-type: none">• Lack of availability of suppliers to deliver the contract needs.
<ul style="list-style-type: none">• Delay in the start of programs - Center Operations could be delayed in commencing services due to the contract approval process.
<ul style="list-style-type: none">• Insufficient customer documentation: failure for the customer to bring in the necessary documentation, due in part to reluctance to provide information .
<ul style="list-style-type: none">• Language barrier to customer applications.
<ul style="list-style-type: none">• Loss of potential customers because of transportation difficulties getting to the necessary agencies to gather supporting documentation required by Center Operations.
<ul style="list-style-type: none">• Baseline expectation worksheets do not contain an evaluation component on individual performance.
<ul style="list-style-type: none">• Customers' lack of income sources to supplement what will be provided by Center Operations.
<ul style="list-style-type: none">• Deliberate non-disclosure of all household income by customer.
<ul style="list-style-type: none">• Difficulty in completing the position upgrade process in a timely manner (could take 2 - 3 years, involving units within Budget, Union, Human Resources, Finance).
<ul style="list-style-type: none">• Funding impacted by the promotion of faith-based organizations as direct recipients of funding
<ul style="list-style-type: none">• Inability to obtain all accurate household information.
<ul style="list-style-type: none">• Insufficient staff to handle customer requests.
<ul style="list-style-type: none">• Natural events - such as tornadoes, electrical outages, flooding - increase the demand for service.
<ul style="list-style-type: none">• Potential customers do not come forward because they are being sought by other agencies, including Immigration Natural Services.
<ul style="list-style-type: none">• Programs lack the substance to sustain customers for a long period; lack of resources to do what needs to be done. Each service can only be provided once per year (with the exception of weatherization).

5. Weatherization Division

(a.) Objective, Impact of Non-Achievement, Indicators of Performance and the Residual Risk Status Index (RRSI)

The objective of the Weatherization Division used in this assessment is:

To weatherize at least 95% of the homes that Human Services is funded to weatherize, in accordance with federal and state guidelines.

It was determined that the impact of not achieving this objective will result in a loss of partial or all funding.

Indicators of current performance include production levels and adhering to the schedule and maintaining average cost per unit.

The RRSI was determined to be **fully acceptable**, considering that there are **no unacceptable concerns**. **No additional attention or corrective actions are required at the current time.**

(b.) Threats to Achievement

The risk assessment identified threats to achievement for the Weatherization Division's objective. Listed below are some of the major threats to achievement.

Threats to Achievement
• Inability to obtain sufficient number of clients.
• Not obtaining sufficient number of trained, licensed and bonded contractors to perform weatherization.
• Not enough State of Michigan certified inspectors.
• Political interference.

(c.) Unacceptable Concerns Related to the Objective

There are no unacceptable concerns for the Weatherization Division's objective.

(d.) Impediments to Achievement of the Objective

The following impediment could prevent the achievement of the objective for Weatherization, the resolution of which is beyond the authority of the work team to address directly.

Impediment
<ul style="list-style-type: none">• Risk of losing funding. This is totally out of Human Services Department control and giving the unwillingness or inability of either the State or City to step in with replacement funding, loss of funding would shut down the program.